

before they transition to secondary school. Therefore, schools could work together to increase school membership and decrease victimisation, particularly for pupils who they suspect will struggle with the transition.

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EW0217

Relationship between pain coping strategies with mental disorders symptoms in patients referring to dental clinics

A. Homayouni^{1,*}, R. Ahmadi¹, G. Nikpour²

¹ Department of psychology, Bandargaz Branch, Islamic Azad University, Bandargaz, Iran

² Department of psychology, Allameh Tabatabaiee University, Tehran, Iran

* Corresponding author.

Introduction The study aimed to assess the relationship between mental disorders symptoms with pain coping strategies in dentistry clinics.

Method One hundred and twenty people with dental pain that attended in dentistry clinics were randomly selected and responded to Rosenstein and Keefe's Pain Coping Strategies Questionnaire (PCSQ) and Derogatis's Symptom Checklist (SCL-90-R). PCSQ assesses six pain coping strategies: diverting attention, reinterpretation pain sensation, self-negotiation, ignoring pain, disastrous thought, hope-praying, and SCL-90 measures nine dimensions: somatization, obsessive compulsive, interpersonal sensitivity, depression, anxiety, hostility, phobic anxiety, paranoid ideation, and psychoticism. The data were analysed with Pearson correlation coefficient and independent *t*-test.

Results Findings showed positive and significant relationship between disastrous thought with all mental disorders symptoms; and reinterpretation pain sensation with depression and anxiety. Also there is negative significant relationship between ignoring pain with obsessive compulsive, interpersonal sensitivity and somatization; and hope – praying with interpersonal sensitivity, depression, anxiety, paranoid ideation and psychoticism. Meanwhile there were significant differences in males and females. Females got more scores in ignoring pain than males, and males got more scores in anxiety, hostility and paranoid ideation than females.

Discussion With regard to findings, it is recommended that in addition to drug treatment, for changing the attitudes and thinking in patients with dental pain, psychiatrists and psychologists apply psychological treatments specially cognitive-behavior therapy to reduce abnormal thinking level about pain so that the length during of treatment declines, and as a results reduce the personality and health problems that is related with dental pain before and in during of drug treatment.

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EW0218

The utilization of a creative strategy in the prevention of the use of psychoactive substances with children and adolescents

J. Jaber*, S. Humel, S. Leite, A. Tomé, A. Hollanda, B. Reys

Clínica Jorge Jaber, Saúde Mental, Rio de Janeiro, Brazil

* Corresponding author.

Introduction The work describes a successful experience in the utilization of art as a tool to work the prevention of the use of

drugs. The experience was developed with children and adolescents between the ages of 3 and 17 who reside in a risky area near Latin America's biggest dump, located in the city of Taguatinga, FD, Brazil.

Objectives Create a therapeutic space to make possible the dialog with the children and adolescents, promoting the prevention and the consciousness about the harm of the use of psychoactive substances, providing clarification on the theme, through art, being the use of formal language and terms, like "illicit drugs", unnecessary.

Methods The children, who participated in the project, used, as expression tool, several painting items. The public was divided by age in two groups: the children received ludic approach, allowing the team nearness and interaction with them, in such a way that the former transmitted information and guidance about the harm on the use of psychoactive substances.

Results The results were satisfactory. All the children and adolescents involved in the project demonstrated adherence to the use of the offered tools and established a communication link, which allowed the receptivity of information about prevention in the use of psychoactive substances.

Conclusions Through the developed activities, it was observed that the strategy utilization of art as a language had better efficiency than a formal approach since the children and adolescents could have a learning space in a spontaneous way, demonstrating interest.

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EW0219

The relationship between neurocognitive functioning and metabolic syndrome (MetS) parameters and the interaction effect of cognitive insight in non-psychiatric individuals

S. Kilian*, L. Asmal, S. Suliman, S. Seedat, R. Emsley

Psychiatry, Stellenbosch University, Cape Town, South Africa

* Corresponding author.

Introduction Metabolic syndrome (MetS) parameters are: elevated waist circumference (WC), triglycerides (TG), fasting glucose (FBG) and blood pressure (BP) and reduced high-density lipoprotein cholesterol (HDL). MetS parameters are associated with poor cognition and this association should be studied in the context of other factors. In particular, factors that are involved in maintaining poor lifestyle choices – MetS is largely a lifestyle illness. One factor important to consider is cognitive insight – an individual's ability to be flexible in how you think about yourself and others and to question your own thoughts.

Objectives To conduct an exploratory cross-sectional study investigating the influence of cognitive insight on the relationship between MetS parameters and cognition in non-psychiatric individuals.

Aims To explore the nature of the relationship between cognition and MetS parameters and test whether cognitive insight moderates the association.

Methods Our sample consisted of *n*=156 participants with mixed-ancestry. Correlations between MetS parameters and cognition were tested. ANOVA was used to test interaction effects and logistic regression was done to test the predictive power of selected factors.

Results BP correlated with attention, delayed memory, and RBANS total scale score. The BCIS self-certainty subscale moderated the relationship between BP and immediate memory and attention. Age and BCIS self-certainty were the only predictors of elevated BP.

Conclusions Good cognitive insight act as protective factor and reduce the impact of elevated BP on cognition. Cognitive insight may be a predictor of elevated BP.

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EW0220

Fatigue and return-to-work in cancer patients: Association with work ability and quality of life

S. Monteiro^{1,2,*}, A. Bártolo¹, A. Andrea¹, S. Diana¹, A. Pereira^{1,3}

¹ Department of Education and Psychology, University of Aveiro, Aveiro, Portugal

² CINTESIS, Faculty of Medicine, University of Porto, Centre for Health Technology and Services Research, Porto, Portugal

³ Department of Education and Psychology, CIDTFF, Research Centre on Didactics and Technology in the Education of Trainers, Aveiro, Portugal

* Corresponding author.

Introduction Fatigue is a common and debilitating problem in cancer survivors. Research show that this symptom endures even in disease-free patients affecting quality of life. Returning to work is physically and emotionally demanding for this population and fatigue levels seems to predict the time taken to return to work and the ability of the worker.

Objective Our main objective was to explore the direct effect of the fatigue on work ability and quality of life of professionally active cancer survivors. Aims Fatigue levels, work ability and overall quality of life of survivors group were compared with a sample of individuals without cancer history. Relationship between fatigue symptoms and work ability and quality of life were examined within of the survivors group.

Methods This cross-sectional study included 57 cancer survivors and 57 controls ($n = 114$) and data was collected from two Central Hospitals of Portugal. Participants completed the Functional Assessment of Chronic Illness Therapy-Fatigue, the Work Ability Index and the Functional Assessment of Cancer Therapy-General.

Results Cancer survivors reported higher levels of fatigue than controls and worse work ability and quality of life ($P < .001$). Controlling the effect of the age and gender, fatigue of the cancer survivors group influenced negatively their overall quality of life ($\beta = -.315$, $P = .013$, $R^2 = .143$) but not their work ability.

Conclusions Although the fatigue has not affected directly the work ability of the cancer survivors, two years or more after the conclusion of the treatments, this symptom has a significant effect on the quality of life.

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EW0221

Paediatric mental health training to school teachers in London, UK

K. Nijabat

Child and Adolescent Psychiatry, UCLH Partners, London, United Kingdom

Introduction The British National Foundation for Educational Research poll found that two thirds of school teachers feel they lack the appropriate training to help identify mental health issues in pupils.¹ I contacted 10 schools in London and teachers gave similar responses to the above poll, stating teachers did not feel confident identifying or managing common mental health issues in children and adolescents aged 5–18.

Aim To deliver mental health training in a user friendly way to teachers and enable them to identify common mental health issues in young people.

Objectives Address underlying concerns teachers have regarding pupils mental health. Discuss strategies to manage common mental health issues.

Method I delivered a 2-hour training workshop to 25 teachers in two different schools in London, June 2016. The training included a lecture on emotional/behavioural and communication disorders in children. There was interactive discussion with teachers, discussing various scenarios, such as children becoming tearful, showing limited eye contact and displaying aggressive behaviour. We discussed how teachers were dealing with this and how better they could manage the situation.

Results I got excellent feedback from teachers, 100% of teachers found the training very useful and would like to have more training of this kind in the future. A multidisciplinary approach is needed to improve the management of mental health in young people.

Conclusions There is a gap in the knowledge teachers have on mental health within the young people and the stigma of mental health makes it more difficult for teachers to address these issues.

Disclosure of interest The author has not supplied his/her declaration of competing interest.

¹ National Foundation for Education Research, <http://www.gov.uk/government/uploads/DFE-June2015>.

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EW0222

Psychological characteristics of emotion control in physicians and teachers

E. Nikolaev

Department of Social and Clinical Psychology, Chuvash State University, Cheboksary, Russia

Introduction Emotional control can play positive role in professional growth. Are there any negative effects of emotional control on the professional activity of physicians and teachers?

Objectives and aims To reveal the specifics of emotional control in groups of physicians and teachers with different self-reported health levels.

Methods The study involved 160 physicians and 179 school teachers. Gender ratio and mean age in both groups were similar. The instruments used: SF-36 health survey and Ban on the emotional expression questionnaire.

Results In general, physicians, and teachers more often than control group controlled the expression of their emotions. Physicians in comparison with teachers were more likely to restrict both positive (joy) and negative emotions (sadness, anger). Teachers with a high level of health by SF-36 had a minimal ban on the expression of sadness ($P < 0.01$). The maximum level of the ban on the expression of anger ($P < 0.001$) and fear ($P < 0.05$) and an aggregated ban of emotional expression was revealed in teachers with average level of health by SF-36 ($P < 0.001$). Expression of joy in teachers was not directly related to the self-reported health level ($P > 0.05$). Physicians who showed the maximum ban on the emotion expressions reported only the low health level by SF-36 ($P < 0.05$). It was more related to the ban on joy, and less to the ban on anger.

Conclusions The revealed models of emotional expression control can strengthen both professional and everyday stresses in physicians and teachers. Different prevention programs are needed for these groups of professionals.

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